



Illinois Department of Revenue

IL-8633-B Business Electronic Filing Enrollment

This enrollment is

☐ New ☐ Revised

Mail to: Electronic Filing Section, Illinois Department of Revenue, P.O. Box 19479, Springfield, IL 62794-9479

Step 1: Provide all identification numbers assigned to your business

- | | |
|--|---|
| 1 Federal Employer Identification number (FEIN) or Social Security number (SSN)
2 Illinois Business Tax number (IBT no.) - if applicable
3 Unemployment Insurance Account number (UI no.) - if applicable | 4 IRS assigned Electronic Filing Identification number (EFIN) - if applicable
5 IRS assigned Electronic Transmitter Identification number (ETIN) - if applicable |
|--|---|

Step 2: Provide participant information

- | | |
|--|--|
| 6 Legal name of business
7 Doing business as (dba) name (if different than above)
8 Street address Suite #
City State ZIP
9 Mailing address (if different than above)
City State ZIP
10 Business e-mail address | 11 Primary contact representative
() - ext.: () -
Daytime phone - include area code FAX - include area code
E-mail address
12 Alternate contact representative
() - ext.: () -
Daytime phone - include area code FAX - include area code
E-mail address |
|--|--|

Step 3: Indicate your activity as a participant - check all that apply

- | | | |
|---|--|---|
| <input type="checkbox"/> Taxpayer | <input type="checkbox"/> Transmitter | <input type="checkbox"/> Electronic Return Originator (ERO) |
| <input type="checkbox"/> Software Developer | <input type="checkbox"/> Transmitter w/IDOR contract | <input type="checkbox"/> Reporting Agent (RA) |

Step 4: Check all that apply to this enrollment**Employer taxes:**

- ☐ Withholding income tax (IL-501, IL-941, IL-W-3)
☐ Emp. Wage and Contribution Report (UI-3/40)
☐ Other _____

Sales, service and use taxes:

- ☐ Sales, service and use

Utility taxes:

- ☐ Telecommunications
☐ Gas/Gas use

Excise taxes:

- ☐ Liquor
☐ Liquor airline
☐ Cigarette
☐ Cigarette use

Step 5: Select a signature code and sign - Taxpayers and Reporting Agents ONLY

Select a code to represent your signature for your electronic returns and/or payments. Your signature code must be six characters and can be letters, numbers, or both. To change your signature code, you must complete a "Revised" Form IL-8633-B.

- | | |
|---|---|
| 13 Write your code for Employer taxes _____ | 15 Write your code for Utility taxes _____ |
| 14 Write your code for Sales, service, & use taxes _____ | 16 Write your code for Excise taxes _____ |

Under penalties of perjury, I state that I have examined this form and to the best of my knowledge, the information is true, correct, and complete. I authorize IDOR and IDES (for Form UI-3/40) to provide my transmitter with information regarding the transmission of my electronic return and associated electronic payment. In addition, I agree that this signature shall be deemed to appear on any electronic returns and payments submitted that include my electronic signature. All returns filed electronically as authorized by this enrollment form are deemed to be accurate, complete, and truthful statements made under penalties of perjury. This enrollment form and electronic signature shall remain in force until IDOR receives written notification from the taxpayer or RA. IDOR and IDES (for Form UI-3/40) reserve the right to suspend or revoke the taxpayer or RA from the applicable program.

Printed name _____	Title _____
Signature _____	Date _____ Social Security number _____

Step 6: Complete and sign - Software Developers, Transmitters, EROs, Reporting Agents ONLY

Under penalties of perjury, I state that I have examined this form and to the best of my knowledge, the information is true, correct, and complete. I state that this firm, including all employees, will comply with all provisions of the applicable electronic filing program. I understand that acceptance for participation is not transferrable and that noncompliance will void participation in the program. I am authorized to make and sign statements on behalf of the firm. IDOR and IDES (for Form UI-3/40) reserve the right to suspend or revoke the participant from the applicable program.

Printed name of authorized individual _____	Title _____	() - ext.: _____
Signature of authorized individual _____	Date _____	Daytime phone - include area code _____ SSN of authorized individual _____

IL-8633-B Instructions

General Information

Who must submit this application?

Any business wishing to enroll in the Illinois Department of Revenue's (IDOR) business electronic filing and payment programs must complete Form IL-8633-B, Business Electronic Filing Enrollment. If you need to change information provided in a previous enrollment you must complete a "Revised" Form IL-8633-B. This includes any business that is sold or changes in organizational structure. Participants may include taxpayers (mandated or voluntary), software developers, ERO's, reporting agents, and any entity that will transmit directly to IDOR (either for themselves or as a service to others).

Note: Form IL-8633-B replaces Forms EF-1, Enrollment for Electronic Filing Program and EDI-1, Registration for Electronic Data Interchange.

Where should I mail Form IL-8633-B?



**ELECTRONIC FILING SECTION
ILLINOIS DEPARTMENT OF REVENUE
PO BOX 19479
SPRINGFIELD IL 62794-9479**

What if I have questions?

If you have questions, write us at Central Registration Division, Illinois Department of Revenue, PO Box 19030, Springfield, Illinois 62794-9030; or call our Springfield office weekdays between 8:30 a.m. and 5:00 p.m. at 217 785-5739.

You can also visit our Web site, which features electronic filing information, forms, and booklets at www.ILtax.com.

Step-by-Step Instructions

Step 1: Provide all identification numbers assigned to your business

Line 1 - A Federal Employer Identification number (FEIN) is issued by the Internal Revenue Service (IRS) and is required for partnerships or corporations. If you are not required to have a FEIN, you must provide your Social Security number (SSN).

Line 2 - Write the Illinois Business Tax number (IBT no.) issued by IDOR for certain reporting purposes, if applicable.

Line 3 - Write your Unemployment Insurance Account number (UI no.) from the Illinois Department of Employment Security (IDES), if applicable.

Line 4 - Write your Electronic Filing Identification number (EFIN) assigned by the IRS, if applicable.

Line 5 - Write your Electronic Transmitter Identification number (ETIN) assigned by the IRS, if applicable.

Step 2: Provide participant information

Line 6 - Write the legal name of your business.

Line 7 - If your business uses a name (e.g., doing-business-as [dba] name) other than the name on Line 6, write that name.

Lines 11 and 12 - Provide information for your primary and alternate contact representatives. It may be necessary to contact you during testing and throughout the processing year.

Step 3: Indicate your type of activity as a participant - check all that apply

Taxpayer - Check here if you are a business taxpayer liable for filing or paying Illinois taxes. You may enroll voluntarily or due to a mandate.

Software Developer - Check here if you develop electronic return formatting software and/or transmission software.

Transmitter - Check here if you transmit electronic return or payment information directly to IDOR.

Transmitter w/IDOR Contract - Check here if you have a contract with IDOR and transmit data electronically as specified in your contract.

Note: Check the "Other" box in Step 4, and write "Contractual" on the line.

Electronic Return Originator (ERO) - Check here if you are an ERO that originates the submission of electronic returns and/or payments. EROs do not sign electronic returns or payments on behalf of taxpayers. ERO clients must use Form IL-8633-B to independently enroll as "Taxpayers" for electronic filing programs.

Reporting Agent (RA) - Check here if you are a company (not an individual) that performs tax services for other business taxpayers. RAs sign returns and payment authorizations on behalf of taxpayers with the signature code selected in Step 5. RA clients must submit Form IL-8655, Reporting Agent Electronic Services Authorization, to the RA who must retain it for inspection by IDOR or IDES (for Form UI-3/40).

Note: RAs who will be filing and paying their own taxes must also check the "Taxpayer" box.

Step 4: Check all that apply to this enrollment

Check the box(es) that indicate the type of tax or form that are applicable to this enrollment. Transmitters w/IDOR contract should check "Other" box, and write "Contractual" on the line.

Step 5: Select a signature code and sign - Taxpayers and Reporting Agents ONLY

**** Signature is required for both new and revised applications.**

Write your 6-digit signature code by the corresponding tax type. This code represents your signature when electronically filing or paying. Read the taxpayer's agreement and provide the required information for the person authorized to act and sign for your business in legal or tax matters or authorized to sign as an RA.

Note: You may select a common or unique signature code for each of the tax types.

Step 6: Complete and sign - Software Developers, Transmitters, EROs, Reporting Agents ONLY

****Signature is required for both new and revised applications.**

Read the agreement and provide the required information for the person authorized to act and sign for your business in legal or tax matters.